

QUIJANO & ASSOCIATES

ATTORNEYS AT LAW

ACCOUNTING RECORDS AND SUPPORTING DOCUMENTATION LEGAL PERSONS OF THE REPUBLIC OF PANAMA

- 1. Name of the Company / Foundation:**
- 2. Accounting Records and Supporting Documentation will be kept at the following physical address:**
- 3. Name of the Custodian who will keep the Accounting Records and Supporting Documentation (in case it is a legal entity, also include the name of the natural person to contact)**
- 4. Custodian's Phone:**
- 5. Custodian Email:**
- 6. Activity of the Legal Entity (check only one box)**

Legal entity engaged exclusively in being holding entity for assets, such as real estate, shares, participation quotas, bank accounts, among others.

Legal entity that carries out commercial acts/operations outside the Republic of Panama

Legal person engaged in the purchase and sale of negotiable instruments and public or private securities, in order to profit from their resale or by any other means of market speculation

Other

Please explain:

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7. Does the legal entity fall into any of the following categories?

- a. Legal entity listed on a recognized local or international stock exchange.

If yes, please indicate the name of the relevant stock exchange and its Ticker:

- b. Legal entity owned by an international or multilateral organization or a State:

If yes, please provide proof of such a fact.

- c. Legal entity that is the owner or charterer of a vessel registered exclusively under the international service of the Merchant Marine of the Republic of Panama:

If yes, please provide the name of the relevant vessel(s) and a copy of your navigation licence:

- d. Legal entity that carries out commercial operations within the Republic of Panama.

If yes, please provide a copy of your Business License (in Spanish "Aviso de Operaciones").

If the legal entity falls within any of the aforementioned categories, it is exempt from the obligation to provide its resident agent annually with originals or copies of its accounting records, otherwise remember to provide them in the required recurrence.

- 8. By clicking on the following box, you are confirming that all of the information provided in this form should be treated as accurate and valid on an annual basis, unless advised otherwise in a written manner**

Full name:

Post:

Signature:

Date: